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Center for Communication Programs



Popular musicians contributed their time and talent gratis to the Stop AIDS Love Life video.



The choice is in your hands



Promoting awareness of HIV/AIDS to school children in Ghana.

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Stop AIDS Love Life in Ghana "Shatters the Silence"

First Phase Leads to Increase in Protective Behaviors Nationally

"You've got to have guts to talk about this!" proclaimed Ghana's First Lady as she launched the country's first national communication program focusing on HIV and AIDS in February 2000. Her comment underscored the primary theme of the initial phase of the Stop AIDS Love Life campaign: to "Shatter the Silence" surrounding HIV/AIDS. Speaking to an audience of parliamentarians, government ministers, international diplomats, representatives from donor agencies, and students, her address sparked a broad mobilization of national, regional, and local leaders to increase dialogue about HIV and AIDS.

The partnership that developed the *Stop AIDS* Love Life campaign included the Ministries of Information and Health, the Ghana AIDS Commission, the Ghana Social Marketing Foundation, and the Johns Hopkins Bloomberg School of Public Health's Center for Communication Programs (CCP). CCP's Population Communication Services project provided technical assistance with funding from the United States Agency for International Development (USAID). The first phase of the campaign integrated mass media and community-level interventions to slow the HIV/AIDS epidemic in

Ghana by promoting greater use of HIV-protective behaviors – abstinence, faithfulness, and condoms.

Following lessons learned in other countries, the program partners viewed a societal response as an essential precondition for HIV-related behavior change. Partly due to relatively low levels of HIV seroprevalence in Ghana (3% as of December 2001), HIV/AIDS was not a high priority on the national agenda prior to the campaign. Working with ongoing advocacy efforts coordinated by UNAIDS and others, the campaign mobilized political leaders and community members to promote increased public dialogue about HIV/AIDS.

The First Phase: Preventing HIV

The initial phase of the Stop AIDS Love Life campaign occurred between February 2000 and June 2001, and emphasized the use of HIV-protective behaviors. Subsequent phases of the campaign placed a greater emphasis on compassion for those living with HIV/AIDS, including the involvement of tribal chiefs in the second phase and religious leaders in the third phase of the campaign. The development of the fourth phase is now underway.

Figure 1. Percent of sexually active respondents reporting condom use at last sex (by year of survey)

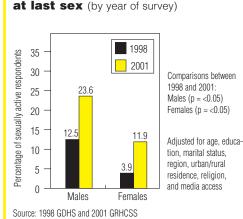
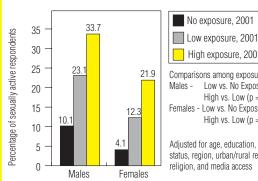


Figure 2. Percent of sexually active respondents reporting condom use at last sex

(by level of exposure to the Stop AIDS Love Life campaign)

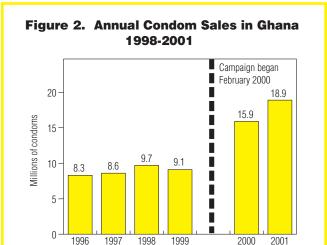


Source: 1998 GDHS and 2001 GRHCSS

High exposure, 2001 Comparisons among exposure categories: Low vs. No Exposure (NS) High vs. Low (p = < 0.05)

Females - Low vs. No Exposure (p = <0.05) High vs. Low (p = <0.05)

Adjusted for age, education, marital status, region, urban/rural residence, religion, and media access



The Stop AIDS Love Life campaign developed a wide array of materials. Shortly after the launch, serial dramas, television spots, and radio spots aired throughout the country. The spots focused on three basic issues: positive behavior modeling for the ABCs of prevention (Abstinence, Being faithful, and Condom use), the need to increase personal perception of HIV risk, and testimonies from Ghanaians living with HIV or AIDS. An award-winning radio show, "Speakeasy," aired for one year, with each episode followed by a live, in-studio discussion among youth of the issue highlighted. "Speakeasy" led to the development of the television program "Things We Do for Love," which is rated the number-one television show in Ghana.

Source: MOH, GSMF, and PPAG sales and distribution figures

The Stop AIDS Love Life music video and song aired on television and radio throughout the campaign's first phase. The refrain "You can maintain one lover. If it's not on, it's not in. Or you can wait until marriage. Love Life. Stop AIDS" encapsulated the program's main messages—be faithful, use a condom every time you have sex, or remain abstinent. Seventeen popular Ghanaian musical artists donated their time to collaborate on the song, with musical styles ranging from rap, reggae, R&B, and gospel, sung in seven different languages.

Community rallies entertained and educated more than 400,000 people in over 200 cities and towns. Twenty audio/visual vans conducted rural outreach by showing videos on AIDS in five languages, and conducting question-and-answer sessions in remote areas throughout Ghana. These vans reached approximately 4 million people, mostly living in poor and rural sections of the country.

Stop AIDS Love Life also provided support for materials development to a large number of groups. Specifically, the program facilitated a participatory process to develop materials, produced large quantities of these materials, and maintained a demand-driven distribution system to ensure materials were used efficiently and effectively to interested government, civic, and community groups. The materials developed included 2 million leaflets, 200,000 Q&A booklets, 50,000 stickers; 30,000 posters, 25,000 t-shirts, and 25,000 caps.

Impact

Researchers measured Stop AIDS Love Life's impact using data from a number of sources. Two household surveys conducted in 1998, the Ghana Demographic and Health Survey (GDHS) and the Ghana Youth Survey (GYS), served as baseline assessments. The Ghana Reproductive Health and Child Survival Survey (GRHCSS), a household survey conducted in July 2001, provided measures following the initial phase of the campaign. Researchers included trends in condom sales between 1996 and 2001 as an independent measure of program effect.

The campaign was successful in reaching a large majority of the population. Overall, 83% of males (aged 15-59) and 77% of females (aged 15-49) recalled hearing or seeing the campaign logo or slogan. Furthermore, 37% of men and 26% of females had high exposure to Stop AIDS Love Life, recalling the campaign in seven to 11 communication channels.

The campaign accomplished its objective of increasing the use of HIV-protective behaviors, particularly regarding the use of condoms. Among sexually active men, condom use at last sex increased from 13% in 1998 to 24% in 2001. Among sexually active women, condom use at last sex increased from 4% to 12% during that period. Further, even after controlling for a number of socio-economic characteristics, those sexually active men and women exposed to the campaign were more likely than unexposed men and women to have used a condom at last sex (Figure 1). While only 10% of male non-viewers used a condom at last sex, 34% of men with high campaign exposure had

done so. Among sexually active women, 4% of female non-viewers reported using a condom at last sex, compared to 22% of women with high campaign exposure. These differences remained when married and single respondents were examined separately.

Trends in condom sales and distribution by the Ministry of Health (MOH), Ghana Social Marketing Foundation (GSMF) and PPAGthe three largest distributors of condoms in the country-offered further evidence of the effect of the campaign on condom use (Figure 2). The number of condoms sold during the two years following the campaign (34.8 million) was almost double that sold during the two years prior to the campaign (18.8 million).

Although condom use increased, age at first sex and multiple partnerships were largely unchanged by the campaign among the population at large. This lack of change in sexual behavior may have been due to the relatively late age of sexual debut and the relatively low level of multiple partnerships in Ghana. Reported faithfulness, however, did increase among married men with high exposure to the campaign as compared to those with no exposure. In light of these findings, the Stop AIDS Love Life campaign will intensify its efforts in promoting abstinence and in reducing the number of partners, especially for single people. The campaign will also increase its emphasis on self-efficacy, self-esteem, and problem solving, particularly for youth audiences. Additionally, a new component was introduced in November 2002 to reduce the stigma associated with HIV/AIDS. Christian and Muslim religious leaders are actively involved in encouraging compassion for those living with HIV/AIDS.

COMMUNICATION Impact!

Summarizes key research and programmatic findings from Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (CCP).

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